

Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

RECEIVED
CITY CLERK'S OFFICE
PALM DESERT, CA

A Public Document

1. Agency Name

2012 APR -6 AM 9:41

California
Form **802**
For Official Use Only

CITY OF PALM DESERT

Division, Department, or Region (if applicable)

Street Address

73510 FRED WARING DRIVE, PALM DESERT, CA 92260

Designated Agency Contact (Name, Title)

JOHN M. WOHLMUTH, CITY MANAGER

Area Code/Phone Number

E-mail

760/346-0611

jwohlmuth@cityofpalmdesert.org

☐ Amendment (Must provide explanation in Part 3.)

Date of Original Filing: _____
(month, day, year)

2. Function, Event, or Ceremonial Role Information

Title Indian Wells Art Festival

Face Value of Each Admission \$ unknown

Description Tickets

Date(s) 4 / 6 / 12 4 / 8 / 12

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: Indian Wells Art Festival
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☐ No ☒ If yes: _____
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles performed by an agency official, individual, or organization.
Schwartz, Deborah	1 <u>No</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Public Relations Income <input type="checkbox"/>
Riddle, Frankie	2 <u>No</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Public Relations Income <input type="checkbox"/>
Ortega, Niamh	2 <u>No</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Public Relations Income <input type="checkbox"/>
Gonzalez, Berntha	2 <u>No</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Public Relations Income <input type="checkbox"/>
White, Bryce	2 <u>No</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Public Relations Income <input type="checkbox"/>
Avery, Ann	2 <u>No</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Public Relations Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Income <input type="checkbox"/>

3. Verification

I, _____, pursuant to Sections 18944.1 and 18942 I have verified that the distribution of admissions, set forth above,

John M. Wohlmuth

City Manager

4/6/2012

Print Name

Title

(month, day, year)

(Leave blank for any additional information including amendment explanation.)